

L1400029847

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S, YOUNG

Account#: 120000000088

Date: 03/07/2017

Name: Marisa Kugelmann

Reference #: G030884

ENTITY NAME: BRIDGE POINT DAVIE, LLC

☐ Articles of Incorporation/Authorization to Transact Business

☐ Amendment

☐ Annual Report

☒ Change of Agent

☐ Reinstatement

☐ Conversion

☐ Merger

☐ Dissolution/Withdrawal

☐ Fictitious Name

☒ Other: certified copy upon filing

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Authorized Amount: \$55.00

Signature: 

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: BRIDGE POINT DAVIE LLC
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

MAURA NOSKA

Name of Person

BRIDGE DEVELOPMENT PARTNERS, LLC

Firm/Company

1000 W. IRVING PARK ROAD, SUITE 150

Address

ITASCA, IL 60143

City/State and Zip Code

MNOSKA@BRIDGEDEV.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MAURA NOSKA

Name of Person

at (312)

683-7230

Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

☐ \$25 Filing Fee

☒ \$55 Filing Fee & Certified Copy

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**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR
LIMITED LIABILITY COMPANY**

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Name of the limited liability company: BRIDGE POINT DAVIE LLC
2. (a) 1000 W. IRVING PARK ROAD
Principal office address of limited liability company:
(Note: MUST BE STREET ADDRESS)
SUITE 150
ITASCA, IL 60143
- (b) 350 W. HUBBARD STREET
Mailing address of limited liability company:
(Note: MAY BE POST OFFICE BOX)
SUITE 430
CHICAGO, IL 60654
3. 10/15/2014
Date of filing/registration in Florida
4. L14000029847
Document number

5. (a) C T CORPORATION SYSTEM
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

1200 SOUTH PINE ISLAND ROAD
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
PLANTATION, FL 33324

- (b) National Corporate Research, Ltd., Inc.
Enter name of NEW Registered Agent and/or NEW Registered Office address:

115 North Calhoun Street, Suite 4
NEW Registered Office Address:
Tallahassee, FL 32301

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If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Signature of a member or authorized representative of a member

Printed or typed name of signer

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Brian Conculer, Asst. Secy. National Corporate Research, Ltd., Inc.
Signature of Registered Agent